Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
,	Write the name that is on your government-issued picture identification (for example, your driver's	First name  Allen	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Cluchey Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Larry Cluchey	
	Include your married or maiden names.	, ,	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3664	

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Debtor 1 Larry Allen Cluchey

Case number (if known)

About Debtor		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs.  Business name(s)  EIN	☐ I have not used any business name or EINs.  Business name(s)  EIN		
5.	Where you live	7095 Mindew Drive SW	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Kent County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for bankruptcy		Check one:  Over the last 180 days before filing this petition,	Check one:  ☐ Over the last 180 days before filing this petition, I		
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Larry Allen Cluch			ey Case number (if known)					
Par	t 2:	Tell the Court About	our Bankı	uptcy Ca	ase			
7.	Bank	chapter of the ruptcy Code you are sing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	CHOO	sing to me under	Chapt	er 7				
			☐ Chapt	er 11				
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8.	How	you will pay the fee	■ Iwi	II nay the	entire fee when I file	my netition Please of	neck with the clerk's office in your local court f	or more details
0.	11011	you will pay the fee	abo	about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or chec a pre-printed address.				
			☐ Ine	ed to pay			ption, sign and attach the Application for Indiv	iduals to Pay
			I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out					
							official Form 103B) and file it with your petition	
9.		you filed for	■ No.					
		ruptcy within the years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District	-	When	Case number	
10.		ny bankruptcy	■ No					
	filed not fi you,	s pending or being by a spouse who is ling this case with or by a business er, or by an te?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.	Do yo	ou rent your ence?	■ No.	Go to I	line 12.			
			☐ Yes.	Has yo	our landlord obtained a	n eviction judgment aga	ainst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Sta</i> this bankruptcy petition		on Judgment Against You (Form 101A) and fil	e it as part of

Deb	otor 1 Larry Allen Cluch	еу			Case number (if known)	
Par	Report About Any Bu	usinesses	You Own as	s a Sole Propriete	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Pa	art 4.		
		☐ Yes.	Name ar	nd location of busi	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number	, Street, City, State	te & ZIP Code	
	it to this petition.		Check th	ne appropriate box	x to describe your business:	
				lealth Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broker	er (as defined in 11 U.S.C. § 101(6))	
			<b>–</b> 1	None of the above	Э	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are c	under Subch hoosing to p statement,	hapter V so that it or occeed under Sub	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debt bechapter V, you must attach your most recent balance sheet, statement of operame tax return or if any of these documents do not exist, follow the procedure in 11	or or tions,
	For a definition of small	■ No.	I am not	filing under Chapt	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filin Code.	g under Chapter 1	11, but I am NOT a small business debtor according to the definition in the Bankr	uptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Cod under Subchapter V of Chapter 11.	de, and
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, Subchapter V of Chapter 11.	and I
Par	t 4: Report if You Own or	· Have Any	Hazardous	Property or Any	y Property That Needs Immediate Attention	
14.	Do you own or have any property that poses or is	■ No.				
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the	hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			te attention is ny is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is th	ne property?		
	- •				Number, Street, City, State & Zip Code	_

Debtor 1 Larry Allen Cluchey

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Larry Allen Cluch	еу		Case number (if known)					
Par	6: Answer These Quest	ions for R	eporting Purposes						
	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			■ No. Go to line 16b.  □ Yes. Go to line 17.						
		16b.		siness debts? Business debts are debts stment or through the operation of the bus					
			☐ No. Go to line 16c.						
			Yes. Go to line 17.						
		16c.	State the type of debts you ov	we that are not consumer debts or busines	s debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.		o you estimate that after any exempt propailable to distribute to unsecured creditors?	erty is excluded and administrative expenses				
	administrative expenses are paid that funds will		■ No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you owe?	<b>1</b> -49		□ 1,000-5,000	☐ 25,001-50,000				
		☐ 50-99		☐ 5001-10,000	<b>5</b> 0,001-100,000				
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000				
19.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	50,000	■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
		_	001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
Par	7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
			nave chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, sed States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
If no attorney represents me and I did not pay or ag document, I have obtained and read the notice requ					t an attorney to help me fill out this				
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.									
			cy case can result in fines up to	concealing property, or obtaining money of \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a vears, or both. 18 U.S.C. §§ 152, 1341, 1519,				
		Larry A	/ Allen Cluchey llen Cluchey e of Debtor 1	Signature of Debto	r 2				
		Executed	on <b>March 1, 2021</b>	Executed on					
			MM / DD / YYYY		/ DD / YYYY				

	Case:21-00524-JWb	Filed: 03/02/2021	Page 7 01 59		
Debtor 1 Larry Allen Cluch	ıchey		Case number (if known)		
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ted States Code, and have e	xplained the relief available under each chap	oter	
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.		( )	` '	
To the time puge.	/s/ Robert F. Wardrop II	Date	March 1, 2021		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Robert F. Wardrop II (P31639)				
	Printed name				
	Wardrop & Wardrop, P.C.				
	Firm name				
	300 Ottawa Avenue, N.W.				
	Suite 150				
	Grand Rapids, MI 49503-2308  Number, Street, City, State & ZIP Code				
	Contact phone (616) 459-1225	Email address	bkfilings@wardroplaw.com		

(P31639) MI Bar number & State

		•			
Fill	in this information to identify your case:				
Deb	tor 1 Larry Allen Cluchey				
Dah		iddle Name Li	ast Name		
	tor 2 use if, filing) First Name M	iddle Name L	ast Name		
Unit	ed States Bankruptcy Court for the: WEST	ERN DISTRICT OF MICHIG	GAN		
Cas	e number				
(if kn					heck if this is an
				ar	mended filing
<b>~</b> (					
	ficial Form 106Sum	:- -::::::	ain Otatiatiaal Informatian		
	mmary of Your Assets and L s complete and accurate as possible. If two				12/15
infor	mation. Fill out all of your schedules first;	then complete the informa	ition on this form. If you are filing amer		
your	original forms, you must fill out a new Sur	nmary and check the box	at the top of this page.		
Part	1: Summarize Your Assets				
					ur assets lue of what you own
				Val	de of what you own
1.	Schedule A/B: Property (Official Form 106/ 1a. Copy line 55, Total real estate, from Sche			\$	563,200.00
	1b. Copy line 62, Total personal property, fro	m Schedule A/B		\$	33,544.18
	1c. Copy line 63, Total of all property on Sch	edule A/B		\$	596,744.18
Part	2: Summarize Your Liabilities				
ı uı	Gammanize Tour Elabilities				
					ur liabilities nount you owe
2.	Schedule D: Creditors Who Have Claims Sec 2a. Copy the total you listed in Column A, Ar.			\$	11,440.10
•		·	. •	•	
3.	Schedule E/F: Creditors Who Have Unsecura 3a. Copy the total claims from Part 1 (priority			\$	0.00
	3b. Copy the total claims from Part 2 (nonpri	ority unsecured claims) fron	n line 6j of Schedule E/F	\$	1,701,102.57
			Your total liabilitie	s \$	1,712,542.67
Part	3: Summarize Your Income and Expens	es			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from lin	ne 12 of Schedule I		\$	4,207.60
5.	Schedule J: Your Expenses (Official Form 10	96J)		•	3,817.56
	Copy your monthly expenses from line 22c o	Schedule J		\$	3,017.30
Part	4: Answer These Questions for Adminis	strative and Statistical Rec	cords		
6.	Are you filing for bankruptcy under Chapt  ☐ No. You have nothing to report on this p		oox and submit this form to the court with y	our othe	r schedules.
	■ Yes				
7.	What kind of debt do you have?				
	Your debts are primarily consumer d		hose "incurred by an individual primarily fo	or a perso	onal, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

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Debtor 1	Larry	Allen	Cluchey	
----------	-------	-------	---------	--

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$			_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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	Ouse.	21 0002+ jw		500 //.1 Tilled. 00/02/2021	i age i	10 01 00		
Fill in this inform	nation to identify	your case and th	is filin	g:				
Debtor 1	Larry Allen (	Cluchey						
D. I	First Name	Middle	Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name				
United States Bar	akruptev Court for	the WESTERN	DISTR	RICT OF MICHIGAN				
Office Clates Bar	intupitoy Court for		5.011					
Case number _								Check if this is an
								amended filing
~								
Official For	rm 106A/E	<u> </u>						
Schedule	e A/B: Pi	roperty						12/15
1. Do you own or had No. Go to Part  Yes. Where is  1.1  7095 Minds	ave any legal or eq	uitable interest in a	ny resid Wha	t is the property? Check all that apply  Single-family home				r exemptions. Put ns on <i>Schedule D:</i>
			■	Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home	Creditors V	Vho Have Clain	ns Sed	cured by Property.
Byron Cen	nter MI	49315-0000	_		Current va entire prop			rent value of the tion you own?
City	State	ZIP Code		Investment property		50,000.00		\$250,000.00
			U Who		(such as fe a life estat		ancy l	wnership interest by the entireties, or non-filing
				Debtor 1 only	spouse			
Kent				Debtor 2 only				
County				Debtor 1 and Debtor 2 only	- Check	t if this is com	munit	v property
				At least one of the debtors and another		structions)	uiill	y property
				r information you wish to add about this ited erty identification number:	m, such as lo	cal		
				cel Number 41-21-10-281-021 SEV	¢156000			

Official Form 106A/B Schedule A/B: Property page 1

Debt	or 1 Larry Alle	n Cluch	ey		Case	e number (if known)	
	If you own or ha	ve more	than one. lis	st here:			
1.2	ii you owii oi iiu	ve more	, than one, in		is the property? Check all that apply		
	7031 Mindew Dr	ive SW			Single-family home	Do not deduct secured	claims or exemptions. Put
_	Street address, if available	e, or other de	escription		Duplex or multi-unit building	the amount of any secu	red claims on Schedule D:
				_	Condominium or cooperative	Creditors write have Cit	aims Secured by Property.
				_			
	_				Manufactured or mobile home	Current value of the	Current value of the
_	Byron Center	MI	49315-000	0_ □	Land	entire property?	portion you own?
	City	State	ZIP Code		Investment property	\$313,200.00	\$313,200.00
					Timeshare	Describe the nature of	your ownership interest
					Other		nancy by the entireties, or
				Who	has an interest in the property? Check one	a life estate), if known JTWRS with siste	
					Debtor 1 only		her Trust - Ladybird
	Kent			_	•		
_	County				Debtor 1 and Debtor 2 only		
	•			_			mmunity property
				O45-a	At least one of the debtors and another r information you wish to add about this ite	(see instructions)	
					r information you wish to add about this ite erty identification number:	iii, sucii as iocal	
					cel # 41-21-10-281-049 2020 SEV \$	156600	
				ı uı	3CI# 41 21 10 201 043 2020 0EV \$	10000	
ome	rs, vans, trucks, tr	ou lease a	a vehicle, also r	eport it on S	ny vehicles, whether they are registere Schedule G: Executory Contracts and Un prcycles		verilicies you own that
	Yes			<b>14</b> 0 - <b>1</b>		Do not deduct secured	claims or exemptions. Put
3.1	OD 1/				In interest in the property? Check one	the amount of any secu	red claims on Schedule D:
				☐ Debtor			aims Secured by Property.
	Year: 2018 Approximate mileage	a·	13700	☐ Debtor	2 only 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:		13700	_	•	entire property:	portion you own:
	VIN ending in 3	20E9 01	unod	At least	one of the debtors and another		
	jointly with nor				if this is community property ructions)	\$17,500.00	\$17,500.00
Exa	atercraft, aircraft, namples: Boats, traile No Yes	notor hores, motors	mes, ATVs and s, personal wate	I other recretercraft, fishi		accessories cessories	\$17,500.0
Part 1	Describe Vous De	reonal and		me			
Part 3		isonai and					
⊸∪ y		v lenal v			of the following items?		Current value of the
	ou ou o	y legal oı			of the following items?		Current value of the portion you own?

Official Form 106A/B

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Debtor 1	Larry Allen C	luchey	Case number (if known)	
	ehold goods and f			claims or exemptions.
<i>Exam</i> □ No		ces, furniture, linens, china, kitchenware		
■ Yes	s. Describe			
		Furniture, kitchenware, appliances, linens - owned j nonfiling spouse - no item with fmv > \$725	jointly with	\$5,000.00
□ No	including cell	nd radios; audio, video, stereo, and digital equipment; computers phones, cameras, media players, games	s, printers, scanners; music coll	ections; electronic devices
		Laptop Computer and accessories - owned jointly w spouse	vith nonfiling	\$700.00
		Television, cell phones - owned jointly with nonfiling	g spouse	\$500.00
Exam <sub>i</sub> ■ No	other collection	figurines; paintings, prints, or other artwork; books, pictures, or cons, memorabilia, collectibles	other art objects; stamp, coin, o	r baseball card collections;
Exam <sub>i</sub> ■ No	musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tab	oles, golf clubs, skis; canoes an	d kayaks; carpentry tools;
□ No	mples: Pistols, rifles	s, shotguns, ammunition, and related equipment		
		9mm firearm		\$300.00
□ No	mples: Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories		
		Wearing apparel, coats, shoes, accessories		\$1,000.00
□ No	mples: Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloc	om jewelry, watches, gems, gol	d, silver
		Wedding Band, College ring, watch		\$300.00
Exar	farm animals mples: Dogs, cats, l	pirds, horses		

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1 Larry Allen Clud	chey	Case number (if know	vn)
	H	ousehold Pet Cat		\$100.00
		ousehold items you did	I not already list, including any health aids you did not list	<u></u>
	5. Add the dollar value of a	II of your entries from F	Part 3, including any entries for pages you have attached	\$7,900.00
	art 4: Describe Your Financial at o you own or have any legal		n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash Examples: Money you have □ No ■ Yes		ome, in a safe deposit box, and on hand when you file your pe	etition
			Cash	\$300.00
			Michigan UIA Debit Card - Bank of America	\$2,023.86
17.			counts; certificates of deposit; shares in credit unions, brokeraç s with the same institution, list each. Institution name:	ge houses, and other similar
		Credit Union 17.1. Member Saving	Lake Michigan Credit Union -account enidng in 6649 joint with nonfiling spouse	\$5.00
	1	Credit Union Advantage 50 17.2. Checking	Lake Michigan Credit Union -account ending in 6649 joint with nonfiling spouse - social security transferred here 02/24/2021, to be direct deposited commencing 03/2021	\$2,860.49
	1	Money Market 17.3. Investment	Comerica Bank - account ending in 3709 - joint with non filing spouse and another	\$0.04
	1	7.4. Premier Packa	Comerica Bank - account ending in 0492 - ge joint with non filing spouse and another	\$91.79
18.	. Bonds, mutual funds, or p  Examples: Bond funds, inve  ■ No	estment accounts with br	rokerage firms, money market accounts	
		Institution or issuer and interests in incorp	name: porated and unincorporated businesses, including an inte	rest in an LLC, partnership, and
	joint venture  ☐ No  ☐ Yes. Give specific informations.			
		Name of entity:	% of ownership:	

Official Form 106A/B Schedule A/B: Property page 4

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Debto	or 1	Larry Al	len Cluchey				Case number	(if known) _		
				26, Inactive	Products, Inc. EIN ceased operations	2020, no	50	%	\$1	.00
Ν	legotia Ion-ne	able instrun	nents include personal	checks, cashi	able and non-negotia ers' checks, promisso sfer to someone by sig	ry notes, and me	oney orders.			
		Give specifi	c information about th Issuer nam							
<i>E</i> :	<i>xamp</i> No	oles: Interes		gh, 401(k), 403	B(b), thrift savings acco	ounts, or other p	ension or profi	t-sharing pla	ans	
Π,	Yes. I	List each ac	ccount separately. Type of accou	ınt:	Institution name:					
Y	our sl xamp	hare of all u			nat you may continue : ıblic utilities (electric, ç				es, or others	
					Institution name	or individual:				
23. <b>A</b> r		ies (A contr	act for a periodic payr	nent of money	to you, either for life o	r for a number c	of years)			
			Issuer name and d	escription.						
26	U.S.C		cation IRA, in an acc (1), 529A(b), and 529		llified ABLE program	n, or under a qu	alified state tu	uition prog	ram.	
■ <sub>1</sub>			Institution name ar	d description.	Separately file the rec	ords of any inte	rests.11 U.S.C.	§ 521(c):		
25. <b>Tr</b>		equitable	or future interests in	property (oth	er than anything list	ed in line 1), an	d rights or po	wers exerc	cisable for your benefit	
		Give specif	ic information about th	nem						
_E	хатр				other intellectual pros from royalties and lic		ents			
		Give specif	ic information about th	nem						
E	хатр		ses, and other gener generg permits, exclusive lice		rative association hold	lings, liquor licer	nses, professio	nal licenses	S	
		Give specif	ic information about th	nem						
Mone	y or p	property ov	ved to you?						Current value of the portion you own?  Do not deduct secure claims or exemptions.	ed
28. <b>Ta</b>		unds owed	to you							
	Yes.	Give specifi	c information about th	em, including v	whether you already fi	led the returns a	and the tax year	rs		
				2020 Incon	ne Tax refund - joii spouse	nt with non	Federal		\$2,076	.00

Schedule A/B: Property

Official Form 106A/B

page 5

Larry Allen Cluchey		Ca	se number (if known)	
		-	State of Michigan	\$783.00
pples: Past due or lump sum		intenance, divorce	e settlement, property sett	lement
aples: Unpaid wages, disabil benefits; unpaid loans	ity insurance payments, disability benefits, s s you made to someone else	ick pay, vacation բ	oay, workers' compensati	ion, Social Security
sts in insurance policies		credit, homeowne	r's, or renter's insurance	
		Beneficiary	:	Surrender or refund value:
_		Debtor an	d Spouse	\$1.00
Alls	state Motor Vehicle Insurance	of Americ	a as	\$1.00
Teri	m policy through Amer. Soc.	Sherry D. Spouse	Cluchy	\$1.00
are the beneficiary of a livir one has died.  Give specific information  s against third parties, wh	ng trust, expect proceeds from a life insurance	ade a demand fo		property because
		nterclaims of the	debtor and rights to set	off claims
		funds attribute		
	y support  ples: Past due or lump sum  Give specific information  amounts someone owes  ples: Unpaid wages, disabil benefits; unpaid loans  Give specific information  sts in insurance policies  ples: Health, disability, or lif  Name the insurance comp  Com  Stat Insu  Alls  Nev  Ter  Mec  Als  insurance policies  suples: Health, disability, or lif  Com  Stat Insurance  Alls  Nev  Ter  Mec  Insurance comp  Com  Stat Insurance  Alls  Nev  Ter  Mec  Insurance comp  Com  Stat Insurance  Alls  Nev  Ter  Mec  Insurance comp  Com  Stat Insurance  Alls  Nev  Ter  Mec  Insurance comp  Com  Stat Insurance comp  Com  Stat Insurance comp  Com  Stat Insurance comp  Com  Com  Stat Insurance comp  Com  Stat Insurance co	y support sples: Past due or lump sum alimony, spousal support, child support, ma dive specific information  amounts someone owes you sples: Unpaid wages, disability insurance payments, disability benefits, splenefits; unpaid loans you made to someone else  Give specific information  sts in insurance policies sples: Health, disability, or life insurance; health savings account (HSA);  Name the insurance company of each policy and list its value. Company name:  State Farm Condo Unitowners Insurance  Allstate Motor Vehicle Insurance  Mechanical Engineers  Alestate In property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance one has died.  Give specific information  s against third parties, whether or not you have filed a lawsuit or maples: Accidents, employment disputes, insurance claims, or rights to such the property and uniquidated claims of every nature, including count.  Describe each claim  contingent and unliquidated claims of every nature, including count.	2020 Income Tax refund / Senior Homestead Property Tax Credit - joint with non filing spouse  y support ples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce Give specific information  amounts someone owes you sples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation penefits; unpaid loans you made to someone else  Give specific information  sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); credit, homeowne company of each policy and list its value.  Company name:  Beneficiary  State Farm Condo Unitowners Insurance  Debtor and  Allstate Motor Vehicle Insurance  Debtor, S of Americ lienholded  New York Life Insurance Company Term policy through Amer. Soc. Mechanical Engineers  Sherry D. Spouse  Insurance policy, or are cure to beneficiary of a living trust, expect proceeds from a life insurance policy, or are cure has died.  Give specific information  s against third parties, whether or not you have filed a lawsuit or made a demand for apples: Accidents, employment disputes, insurance claims, or rights to sue  Describe each claim  contingent and unliquidated claims of every nature, including counterclaims of the	2020 Income Tax refund / Senior Homestead Property Tax Credit - joint with non filling spouse   State of Michigan

■ No

 $\square$  Yes. Give specific information..

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Debto	pr 1 Larry Allen Cluchey		Case number (if known)	
	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$8,144.18
Part 5	Describe Any Business-Related Property You Own or Have an Interd	est In. List any real esta	ate in Part 1.	
	you own or have any legal or equitable interest in any business-relate	ed property?		
<b>I</b>	No. Go to Part 6.			
	'es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>D</b> e	o you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
E	by you have other property of any kind you did not already list? Examples: Season tickets, country club membership  No  Yes. Give specific information	?		
54.	Add the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. <b>I</b>	Part 1: Total real estate, line 2			\$563,200.00
56. <b>I</b>	Part 2: Total vehicles, line 5	\$17,500.00		
57. <b>I</b>	Part 3: Total personal and household items, line 15	\$7,900.00		
58. <b>I</b>	Part 4: Total financial assets, line 36	\$8,144.18		
59. <b>I</b>	Part 5: Total business-related property, line 45	\$0.00		
60. <b>I</b>	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>I</b>	Part 7: Total other property not listed, line 54 +	\$0.00		
62. <b>-</b>	Total personal property. Add lines 56 through 61	\$33,544.18	Copy personal property total	\$33,544.18
63. <b>-</b>	Total of all property on Schedule A/B. Add line 55 + line 62			\$596,744.18

Official Form 106A/B Schedule A/B: Property page 7

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Debtor 1	Larry Allen Cluch	ey		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF MICHIGAN	
Case number (if known)				☐ Check if this is an
				amended filing

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited

Part 1:	identity	tne Property	You Claim as Exempt

.0 .	ne applicable statutory amount.					
Pa	rt 1: Identify the Property You Claim as E	xempt				
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.		
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	s.C. § 522(b)(3)		
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B				
	7095 Mindew Drive SW Byron Center,	\$250,000.00		\$250,000.00	Mich. Comp. Laws §	
	MI 49315 Kent County Parcel Number 41-21-10-281-021 SEV \$156900 Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit	600.5451(1)(n)	
	2018 Honda CR-V 13700 miles	\$17,500.00		\$3,725.00	Mich. Comp. Laws §	
	VIN ending in 3058 - owned jointly with non filing spouse Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	600.5451(1)(g)	
	Furniture, kitchenware, appliances, linens - owned jointly with nonfiling	\$5,000.00		\$2,500.00	Mich. Comp. Laws § 600.5451(1)(c)	
	spouse - no item with fmv > \$725 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	000.040 1(1)(0)	
	Laptop Computer and accessories -	\$700.00		\$700.00	Mich. Comp. Laws §	

\$500.00

owned jointly with nonfiling spouse

Television, cell phones - owned

jointly with nonfiling spouse

Line from Schedule A/B: 7.1

Line from Schedule A/B: 7.2

600.5451(1)(h)

600.5451(1)(c)

Mich. Comp. Laws §

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$250.00

or 1 Larry Allen Cluchey	Current value of the	A	Case number (if known)	Charifia laws that all
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from		ount of the exemption you claim  ck only one box for each exemption.	Specific laws that allow exemptio
9mm firearm	Schedule A/B		,	Mich. Comp. Laws §
Line from <i>Schedule A/B</i> : <b>10.1</b>	\$300.00		\$300.00	600.5451(1)(c)
			100% of fair market value, up to any applicable statutory limit	
Wearing apparel, coats, shoes,	\$1,000.00		\$1,000.00	Mich. Comp. Laws § 600.5451(1)(a)(iii)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	, and a company of
Wedding Band, College ring, watch Line from Schedule A/B: 12.1	\$300.00		\$300.00	Mich. Comp. Laws § 600.5451(1)(c)
Line ii am donoddio 77 D. 1211			100% of fair market value, up to any applicable statutory limit	3330701(1)(0)
Household Pet Cat Line from Schedule A/B: 13.1	\$100.00		\$100.00	Mich. Comp. Laws § 600.5451(1)(f)
Ellie II olii ochedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	33331(1)(1)
Cash Line from <i>Schedule A/B</i> : <b>16.1</b>	\$300.00		\$300.00	Mich. Comp. Laws § 600.5451(1)(b) In re
ine non concade 7/2. 10.1			100% of fair market value, up to any applicable statutory limit	Richardson #20-30790 USBCEDMI 8/13/2020
Michigan UIA Debit Card - Bank of America	\$2,023.86		\$2,023.86	Mich. Comp. Laws § 421.3
Line from Schedule A/B: 16.2			100% of fair market value, up to any applicable statutory limit	
Credit Union Member Savings: Lake Michigan Credit Union -account	\$5.00		\$2.50	Mich. Comp. Laws § 600.5451(1)(b) In re
enidng in 6649 joint with nonfiling spouse Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	Richardson #20-30790 USBCEDMI 8/13/2020
Credit Union Advantage 50 Checking: Lake Michigan Credit	\$2,860.49	•	\$1,430.25	42 U.S.C. § 407
Union -account ending in 6649 joint with nonfiling spouse - social security transferred here 02/24/2021, to be direct deposited commencing 03/2021  Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Money Market Investment: Comerica Bank - account ending in 3709 - joint	\$0.04		\$0.04	Mich. Comp. Laws § 600.5451(1)(b)
with non filing spouse and another Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	000.040 I( I)(D)
Premier Package: Comerica Bank - account ending in 0492 - joint with	\$91.79		\$46.00	Mich. Comp. Laws § 600.5451(1)(b) In re
non filing spouse and another			100% of fair market value, up to	Richardson #20-30790

1 Larry Allen Cluchey			Case number (if known)		
	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	<b>\$2,076.00</b> ■		\$1,038.00	Mich. Comp. Laws § 600.5451(1)(b) In re	
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	Richardson #20-30790 USBCEDMI 8/13/2020	
	\$783.00		\$391.50	Mich. Comp. Laws § 600.5451(1)(b) In re	
ax Credit - joint with non filing bouse			100% of fair market value, up to any applicable statutory limit	Richardson #20-30790 USBCEDMI 8/13/2020	
	\$1.00		\$1.00	Mich. Comp. Laws § 500.2207	
echanical Engineers eneficiary: Sherry D. Cluchy oouse			100% of fair market value, up to any applicable statutory limit		
e you claiming a homestead exemption			led on or after the date of adjustmen	nt )	
	rief description of the property and line on chedule A/B that lists this property  ederal: 2020 Income Tax refund - bint with non filing spouse the from Schedule A/B: 28.1  tate of Michigan: 2020 Income Tax befund / Senior Homestead Property ax Credit - joint with non filing bouse the from Schedule A/B: 28.2  ew York Life Insurance Company term policy through Amer. Soc. techanical Engineers	ciref description of the property and line on chedule A/B that lists this property  Current value of the portion you own  Copy the value from Schedule A/B  \$2,076.00  \$2,076.00  \$3.00  \$4.00  \$2,076.00  \$4.00  \$5	crief description of the property and line on chedule A/B that lists this property  Current value of the portion you own  Copy the value from Schedule A/B  Copy the value from Schedule A/B  \$2,076.00  Americal Ending Spouse  The from Schedule A/B: 28.1  Carrent value of the portion you own  Copy the value from Schedule A/B  \$2,076.00  Americal Ending Spouse  The from Schedule A/B: 28.1  Carrent value of the portion you own  Copy the value from Schedule A/B: 28.2  Special Ending Spouse  The from Schedule A/B: 28.2  Carrent value of the portion you own  Copy the value from Schedule A/B: 28.2  Special Ending Spouse  The from Schedule A/B: 28.2  Carrent value of the portion you own  Copy the value from Schedule A/B: 28.2  Special Ending Spouse  The from Schedule A/B: 28.2  Carrent value of the portion you own  Copy the value from Schedule A/B: 31.3  Special Ending Spouse  The portion you own  Copy the value from Schedule A/B: 31.3  Special Ending Spouse  Chedule A/B  Special Ending Spouse  Carrent value of the portion you own  Copy the value from Schedule A/B  Special Ending Spouse  Special Ending Spouse  Chedule A/B  Special Ending Spouse  Special Ending Spouse  Chedule A/B  Special Ending Spouse  Chedule A/B  Special Ending Spouse  Special Ending	Current value of the property and line on Schedule A/B that lists this property  Copy the value from Schedule A/B  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.1  Sederal: 2020 Income Tax refund - Schedule A/B: 28.2  Sederal: 2020 Income Tax refund - Schedul	

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	Ou30.21	00024 JWB	02/2021 Tag	C 20 01 33	
Fill in this inform	nation to identify you	r case:			
Debtor 1	Larry Allen Cluc	hev			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
	nkruptcy Court for the:	WESTERN DISTRICT OF MICHIGAN			
Office Glates Da	initiapitely Court for the.	WESTERN BISTRIOT OF MISTRIOTAT			
Case number _				Charle	if their in one
(ii kilowii)				_	if this is an ded filing
					iod iiii ig
Official Forn	n 106D				
Schedule	D: Creditors	Who Have Claims Secured	d by Property	y	12/15
is needed, copy the	Additional Page, fill it o	f two married people are filing together, both are eq out, number the entries, and attach it to this form. O			
number (if known).					
_ `	have claims secured by		au hava nathing also t	a ranget on this form	
_		nis form to the court with your other schedules. Y	ou have nothing else t	o report on this form.	
	all of the information b	pelow.			
	II Secured Claims		Column A	Column B	Column C
		nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this	portion If any
2.1 Bank of A	merica	Describe the property that secures the claim:	\$11,440.10	\$17,500.00	\$0.00
Creditor's Nam	e	2018 Honda CR-V 13700 miles			
Attn: Ban	kruptcy	VIN ending in 3058 - owned jointly			
NC4-105-		As of the date you file, the claim is: Check all that			
PO Box 2		apply.			
	oro, NC 27420	Contingent			
Number, Street	, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		■ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only		car loan)			
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	he debtors and another	☐ Judgment lien from a lawsuit			
Check if this cl		Other (including a right to offset)			
	6/10/2019				
Date debt was inc		Last 4 digits of account number 0853			

Debtor 1 Larry Allen Cluchey					Case number (if known)				
First Name Middle Name Last Name									
2.2	Comerica Bank		Describe the property that secures	the claim:	\$0.00	\$250,000.00	\$0.00		
	reditor's Name		7095 Mindew Drive SW Byrd Center, MI 49315 Kent Coul Parcel Number 41-21-10-281 SEV \$156900	on nty I-021			·		
F	P.o. Box 71203 Philadelphia, PA 19		As of the date you file, the claim is: apply.  Contingent	Check all that					
N	lumber, Street, City, State & 2	Zip Code	☐ Unliquidated ☐ Disputed						
	wes the debt? Check of	one.	Nature of lien. Check all that apply.						
	tor 1 only tor 2 only		An agreement you made (such as car loan)	mortgage or se	ecured				
	otor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, me	chanic's lien)					
At le	east one of the debtors a	nd another	☐ Judgment lien from a lawsuit						
	eck if this claim relates mmunity debt	to a	Other (including a right to offset)	HELOC M	ortgage recorded 08	/15/2019			
	Op- 08/ Act	ened 19 Last tive 5/20	Last 4 digits of account num	ber <u>0001</u>					
Part 2 Use thi trying than or	s is the last page of you that number here:  List Others to Be s page only if you have to collect from you for a	Notified for e others to be a debt you one debts that	olumn A on this page. Write that num the dollar value totals from all pages. or a Debt That You Already Listed e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the additional is page.	a debt that you	then list the collection ag	7.10  For example, if a collection ency here. Similarly, if you	have more		
[ ]	Name, Number, Street, Bank of America PO Box 45144 Jacksonville, FL	City, State &			ich line in Part 1 did you en				
[]	Name, Number, Street, Bank of America FL9-600-02-26 P O Box 45224 Jacksonville, FL	•			ich line in Part 1 did you en digits of account number _				
[]	Name, Number, Street, Bank of America P O Box 2759 Jacksonville, FL	•	a Zip Code		ich line in Part 1 did you en				
[]	Name, Number, Street, Comerica Bank Comerica Bank T 1717 Main Street Dallas, TX 75201	ower	a Zip Code		ich line in Part 1 did you en				

						. ugo -				
Filli	in this informa	ation to identify your c	ase:							
Deb	tor 1	Larry Allen Cluche	₽V							
		First Name	Middle Name	Last Name	)					
	tor 2	E: AN	ACT III AT							
(Spot	use if, filing)	First Name	Middle Name	Last Name	)					
Unit	ed States Banl	kruptcy Court for the:	WESTERN DISTRICT OF	MICHIGAN						
Cas	e number									
(if kno								Check	if this is an	
								amend	ed filing	
Off:	icial Form	106E/E								
	icial Form		ha Hayra Huanayu	ad Claim	_				40/45	•
			no Have Unsecur Part 1 for creditors with PRI						12/15	
Sche eft. A	dule D: Creditor	's Who Have Claims Secu nuation Page to this page	red Leases (Official Form 106 red by Property. If more space b. If you have no information	ce is needed, co	py the Part	t you need, fill it out, i	number the	entries ir	the boxes	
Part	1: List All	of Your PRIORITY Uns	secured Claims							
1.	Do any creditors	s have priority unsecured	claims against you?							
ļ	No. Go to Par	rt 2.								
	Yes.									
i I	identify what type possible, list the	e of claim it is. If a claim has claims in alphabetical order	If a creditor has more than one both priority and nonpriority are according to the creditor's nar ticular claim, list the other credi	mounts, list that one. If you have m	laim here a	and show both priority a	nd nonprior	ity amount	s. As much	as
(	(For an explanati	on of each type of claim, se	ee the instructions for this form	in the instruction	booklet.)					
						Total claim	Priority amount		Nonpriorit amount	y
2.1	Internal F	Revenue Service	Last 4 digits of a	ccount number	3664	\$0.00		\$0.00		\$0.00
	Priority Cred		When was the de	ht incurred?	EOD NO	OTICE ONLY				
	Insolven PO Box 7	•	When was the de	bt incurred?	FOR NO	JIICE UNLT	-			
		ohia, PA 19101-7346								
		eet City State Zip Code	As of the date yo	u file, the claim	is: Check a	all that apply				
	_	the debt? Check one.	☐ Contingent							
	Debtor 1 on	•	☐ Unliquidated							
	Debtor 2 on	ly	☐ Disputed							
	Debtor 1 an	d Debtor 2 only	Type of PRIORIT	Y unsecured cla	im:					
	At least one	of the debtors and another	☐ Domestic supp	ort obligations						
	☐ Check if thi	is claim is for a communi	•	,		•				
		bject to offset?	☐ Claims for dea	th or personal inj	ury while yo	ou were intoxicated				
	No		☐ Other. Specify							
	☐ Yes									

Debtor 1 Larry Allen Cluchey		Case number (if known)					
2.2		Last 4 digits of account number	3664	\$0.00	\$0.00	\$0.00	
	Priority Creditor's Name Bankruptcy - Claims Unit PO Box 30168	When was the debt incurred?					
	Lansing, MI 48909  Number Street City State Zip Code	As of the date you file, the claim	is: Check	all that apply			
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt Is the claim subject to offset?  ■ No ☐ Yes	■ Taxes and certain other debts y □ Claims for death or personal inju □ Other. Specify	ury while y	<del>-</del>			
	Do any creditors have nonpriority unsecured claims  No. You have nothing to report in this part. Submit to	s against you?	chedules.				
4.	■ Yes.  List all of your nonpriority unsecured claims in the						
	unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other						
	Part 2.				Total claim		
4.4	Amay	Look 4 digito of account number	006	3		218.00	
4.1	Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	Last 4 digits of account numb  When was the debt incurred?		ened 08/91 current	<del>`</del>	<u> </u>	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the cla	m is: Che	ck all that apply			
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim	:			
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a s report as priority claims	eparation a	agreement or divorce that you did no	ot		
	■ No	☐ Debts to pension or profit-sha	aring plans	s, and other similar debts			
	Yes			Gold Card Credit Card			

Debto	Larry Allen Cluchey	Case number (if known)	
4.2	Chase Card Services	Last 4 digits of account number 7657	\$34.63
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 15298	When was the debt incurred? Opened 03/16 current	
	Wilmington, DE 19850		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent	
		☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Chase Amazon Credit Card	
4.3	Costco Anywhere Visa Card	Last 4 digits of account number 7570	\$1.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 6500	When was the debt incurred? Opened 10/16 current	
	Sioux Falls, SD 57117  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Costco Visa Credit Card	
4.4	James P. Silk	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Spengler Nathanson P.L.L. 900 Adams Street	When was the debt incurred? 2020 -2021	
	Toledo, OH 43604-5505  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	FOR NOTICE ONLY - counsel in WEI/ARP/Cluchey Federal District Coulitigation	ırt

Debtor	1 Larry Allen Cluchey	Case number (if known)						
4.5	MSU Fedl Credit Union	Last 4 digits of account number	0200	\$5,124.00				
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 08/18 Current					
	Po Box 1208							
	East Lansing, MI 48826	_						
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	<u>_</u>						
	Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-sharing	ng plans, and other similar debts					
		Vehicle Lea	ase - co-lessee has possession,					
	Yes	Yes Other. Specify insures, maintain payments						
	000 110 7	Lord P. P. A. A. C.		<b>***</b>				
4.6	Office of the U.S. Trustee  Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00				
	The Ledyard Bldg 2nd Floor	When was the debt incurred?	FOR NOTICE ONLY					
	125 Ottawa Ave., NW, Ste 200R							
	Grand Rapids, MI 49503	_						
Number Street City State Zip Code		As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt	Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims						
	No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify						
4.7	Synchrony Bank/ JC Penneys Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00				
	Attn: Bankruptcy		Opened 12/94 Last Active					
	PO Box 965064	When was the debt incurred?	4/26/20					
	Orlando, FL 32896							
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	_						
	Debtor 1 only	Contingent						
	☐ Debtor 2 only	ebtor 2 only  Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	$\square$ Check if this claim is for a community	☐ Student loans						
	debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-sharing	• • • • • • • • • • • • • • • • • • • •					
	☐ Yes	Other. Specify Charge Ac	count					

Debtor	1 Larry Allen Cluchey			Case number (if known)			
4.8	Synchrony Bank/Care Credit	Last 4 digits of accou	ınt number	8624	\$1.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965064 Orlando, FL 32896	When was the debt in	curred?	Opened 04/18 Last Active 09/20			
	Number Street City State Zip Code	As of the date you file	e, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed		Later			
	At least one of the debtors and another	Type of NONPRIORIT  Student loans	Y unsecure	d claim:			
	☐ Check if this claim is for a community debt			and the second s			
	Is the claim subject to offset?	report as priority claims		ration agreement or divorce that you did not			
	No	Debts to pension or	r profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify M	EDICAL -	DENTAL			
4.9	Worthington Energy Innovations Nonpriority Creditor's Name	Last 4 digits of accou	ınt number		\$1,695,723.94		
	504 Liberty Street Fremont, OH 43420	When was the debt in	curred?	2018-2020			
•	Number Street City State Zip Code	As of the date you file	e, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	Contingent					
	Debtor 1 only						
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed	·				
	At least one of the debtors and another	<u></u> '	Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Check if this claim is for a community debt		☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Is the claim subject to offset?						
	No	Debts to pension or	r profit-sharir	g plans, and other similar debts			
	☐ Yes	pi pi U: 1,	American Research Products, Inc. purchase orders for design/mfg high pressure adiabatic humidification systems. USDC ND OH (Toledo) #3:20-cv-01454-JZ 1,097,861.97 + 597,861.97- Debtor not a Guarantor				
Part 3:	List Others to Be Notified About a D	ebt That You Already List	ted				
is tryir have r	is page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts the ed for any debts in Parts 1 or 2, do not fill out	someone else, list the origina at you listed in Parts 1 or 2,	al creditor in	Parts 1 or 2, then list the collection agency	here. Similarly, if you		
-	nd Address	On which entry in Part 1 or P		_			
Amex	ox 981537	Line 4.1 of (Check one):		Part 1: Creditors with Priority Unsecured Clain			
_	so, TX 79998-1535			Part 2: Creditors with Nonpriority Unsecured C	Claims		
		Last 4 digits of account numl	ber	8063			
	nd Address	On which entry in Part 1 or P		_			
	e Card Services ox 15369	Line 4.2 of (Check one):		Part 1: Creditors with Priority Unsecured Clain			
	ngton, DE 19850			Part 2: Creditors with Nonpriority Unsecured C	ciaims		
		Last 4 digits of account numl	ber	7657			
Name ar	nd Address	On which entry in Part 1 or P	art 2 did you	list the original creditor?			
CITI		Line 4.3 of (Check one):		f I Part 1: Creditors with Priority Unsecured Clain	ns		
PO Bo	o Anywhere Visa Card ox 6190 Falls, SD 57117			Part 2: Creditors with Nonpriority Unsecured 0	Claims		

Official Form 106 E/F

# 

Debtor 1 Larry Allen Cluchey		Case number (if known)
	Last 4 digits of account number	7570
Name and Address	On which entry in Part 1 or Part 2 d	
Clerk of the Court	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
U.S. District Court - ND of OH 1716 Spielbusch Avenue Toledo, OH 43604		■ Part 2: Creditors with Nonpriority Unsecured Claims
101000, 011 40004	Last 4 digits of account number	54JZ
Name and Address	On which entry in Part 1 or Part 2 d	· _
Dell Financial Services	Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Po Box 81607 Austin, TX 78708		☐ Part 2: Creditors with Nonpriority Unsecured Claims
Austin, 17 70700	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	
Internal Revenue Service	Line <b>2.1</b> of ( <i>Check one</i> ):	■ Part 1: Creditors with Priority Unsecured Claims
3251 N. Evergreen Drive, NE Insolvency Group 4, Stop 93		☐ Part 2: Creditors with Nonpriority Unsecured Claims
Grand Rapids, MI 49525	Last 4 digits of account number	FOR NOTICE ONLY
Name and Address	On which entry in Part 1 or Part 2 d	did you list the original creditor?
MSU Fedl Credit Union	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
3777 West Road East Lansing, MI 48826		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	0200
Name and Address	On which entry in Part 1 or Part 2 d	did you list the original creditor?
Steven D. Forry	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
ICE MILLER LLP 250 West Street Suite 700		■ Part 2: Creditors with Nonpriority Unsecured Claims
Columbus, OH 43215	Last 4 digits of account number	Worthington Energy Innovations
Name and Address	On which entry in Part 1 or Part 2 d	did you list the original creditor?
Synchrony Bank/ JC Penneys	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Po Box 965007 Orlando, FL 32896		Part 2: Creditors with Nonpriority Unsecured Claims
Oriando, i E 32090	Last 4 digits of account number	3872
Name and Address	On which entry in Part 1 or Part 2 d	
C/o Po Box 965036	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Orlando, FL 32896		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	8624
Name and Address	On which entry in Part 1 or Part 2 d	did you list the original creditor?
US Attorney's Office Western District of Michigan	Line <b>2.1</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims
Bankruptcy Section PO Box 208		☐ Part 2: Creditors with Nonpriority Unsecured Claims
Grand Rapids, MI 49501-0208	Last 4 digits of account number	FOR NOTICE ONLY
Port 4: Add the Americate for Each Time	on of Unangurad Claim	
Part 4: Add the Amounts for Each Type  6. Total the amounts of certain types of unsections.		stical reporting purposes only. 28 U.S.C. §159. Add the amounts for eac
type of unsecured claim.	aroa olamio. Tino miorination io ioi statis	Total Topoliting purposes only. 20 0.0.0. \$100. Add the animalitis for each

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00

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Case number (if known)

### Debtor 1 Larry Allen Cluchey

	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Total	6f.	Student loans	6f.	\$	Total Claim 0.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ _ \$	0.00 0.00
	6i. 6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.  Total Nonpriority. Add lines 6f through 6i.	6i. 6j.	\$_ _	1,701,102.57
	Oj.	Total Nonpriority. Add intes of unough of.	oj.		1,701,102.57

Case:21-00524-jwb Doc #:1 Filed: 03/02/2021 Page 29 of 59

Fill in this infor				
Debtor 1	Larry Allen Cluch	ney		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT (	OF MICHIGAN	
Case number				
(if known)				☐ Check if this is ar
				amended filing

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 MSU FedI Credit Union
Attn: Bankruptcy
PO Box 1208
East Lansing, MI 48826

State what the contract or lease is for

Co-signor only for 2018 48 month Vehicle Lease - sister maintains possession, insures, makes payments
@\$427.15/month

Case:21-00524-jwb Doc #:1 Filed: 03/02/2021 Page 30 of 59

Fill in th	nis information to identify your	case:		
Debtor 1		<u> </u>		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if,		Middle Name	Last Name	
United S	States Bankruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN	
Case nu	ımher			
(if known)				☐ Check if this is an amended filing
Offici	al Form 106H			
Sche	dule H: Your Cod	ebtors		12/15
people a	re filing together, both are equ	ally responsible for supposes on the left. Attack	plying correct information. In the Additional Page to this	nplete and accurate as possible. If two married f more space is needed, copy the Additional Page, s page. On the top of any Additional Pages, write
1. D	o you have any codebtors? (If	you are filing a joint case,	do not list either spouse as a	codebtor.
	lo.			
□ N ■ Y				
	<b>/ithin the last 8 years, have you</b> ona, California, Idaho, Louisiana,			Community property states and territories include n, and Wisconsin.)
	Io. Go to line 3.			
	es. Did your spouse, former spou	use, or legal equivalent liv	e with you at the time?	
			•	
in li Fori	ne 2 again as a codebtor only i	f that person is a guaran	ntor or cosigner. Make sure	ur spouse is filing with you. List the person shown you have listed the creditor on Schedule D (Officia Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	American Research Produ	ucts Inc		☐ Schedule D, line
	c/o Larry Cluchey shareho	older	İ	Schedule E/F, line 4.9
	7095 Mindew Drive SW Byron Center, MI 49315		I	☐ Schedule G Worthington Energy Innovations
3.2	Connie Hoffmann		-	☐ Schedule D, line
	7031 Mindew Dr SW			Schedule E/F, line 4.5
	Byron Center, MI 49315		1	□ Schedule G MSU FedI Credit Union
	a			
3.3	Sherry Cluchey 7095 Mindew Drive SE			☐ Schedule D, line
	Byron Center, MI 49315			Schedule E/F, line 2.1
	,			□ Schedule G Internal Revenue Service
				internal Neverlue Service

# 

Debtor '	Larry Allen Cluchey	Case number (if known)				
	Additional Page to List More Codebtors  Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:				
3.4	Sherry Cluchey 7095 Mindew Drive SE Byron Center, MI 49315	□ Schedule D, line ■ Schedule E/F, line2.2 □ Schedule G Michigan Dept of Treasury				
3.5	Sherry Cluchey 7095 Mindew Drive SE Byron Center, MI 49315	■ Schedule D, line □ Schedule E/F, line □ Schedule G Comerica Bank				
3.6	Connie Hoffmann 7031 Mindew Dr SW Byron Center, MI 49315	☐ Schedule D, line ☐ Schedule E/F, line ■ Schedule G2.1 Msu Fed Cu				

					_			
	in this information to ic	7.7						
Del	btor 1 <u>L</u>	arry Allen (	Cluchey					
	btor 2							
Uni	ited States Bankruptcy	Court for the	: WESTERN DISTRICT	T OF MICHIGAN				
Cas	se number				Chec	k if this is:		
(If kr	nown)			-		n amende	d filing	
						suppleme	Ū	estpetition chapter ving date:
0	fficial Form 1	<u>061</u>			Ī	MM / DD/ Y	YYY	
S	chedule I: Yo	our Inc	ome					12/15
atta	ch a separate sheet t			ith you, do not include informat ional pages, write your name an				
1.	Fill in your employment information.			Debtor 1		Debtor 2	or non-filing	spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed		☐ Employed			
			☐ Not employed		■ Not employed			
		Occupation	retired		retired			
	Include part-time, se self-employed work.	asonal, or	Employer's name	former business owner				
	Occupation may incl or homemaker, if it a		Employer's address					
			How long employed t	here?		_		
Par	rt 2: Give Detail	s About Mor	nthly Income					
	mate monthly incomo		ate you file this form. If	you have nothing to report for any	line, write	e \$0 in the	space. Include	e your non-filing
	ou or your non-filing spo e space, attach a sepa			ombine the information for all emp	loyers for	that perso	n on the lines	below. If you need
					For De	btor 1	For Debtor non-filing s	
2.			ry, and commissions (b			0.00	\$	0.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

3.

0.00

0.00

+\$

\$

3.

0.00

0.00

Deb	tor 1	Larry Allen Cluchey	_	Case n	umber (if known)		
				For I	Debtor 1		otor 2 or ng spouse
	Cop	y line 4 here	4.	\$	0.00	\$	0.00
5.	Liet	all payroll deductions:					
J.			Fo	ď	0.00	<b>c</b>	0.00
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a. 5b.	\$	0.00	\$	0.00
	5c.	·		\$ 	0.00	\$	0.00
	5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$ 	0.00	\$	0.00
	5a. 5e.	Insurance	5e.	\$—	0.00	\$	0.00
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	5g.	Union dues	5g.	\$	0.00	\$	0.00
	5h.	Other deductions. Specify:	5h.+	· : —	0.00	· —	0.00
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$ 	0.00
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 	0.00	\$	0.00
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				·	
	O.L.	monthly net income.	8a.	\$	0.00	\$	0.00
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive	8b. t	\$	0.00	\$	0.00
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00
	8d.	Unemployment compensation	8d.	\$	1,120.00	\$	0.00
	8e.	Social Security	8e.	\$	2,347.80	\$	739.80
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,467.80	\$	739.80
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	+ \$_	739	.80 = \$ 4,207.60
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your rifiends or relatives.  In include any amounts already included in lines 2-10 or amounts that are not cify:	r depen		•	ed in <i>Sche</i>	edule J. 11. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines				, if it	12. \$ <b>4,207.60</b>
13.	Do y	ou expect an increase or decrease within the year after you file this form	1?				Combined monthly income
		No.		00/0	200 - L		
		Yes. Explain: portion of Unemployment benefits scheduled to	expire	03/20	JZU absent ex	tension	

Official Form 106l Schedule I: Your Income page 2

E:II	in this info	tion to identify	V. IV. 00000									
FIII	in this informa	tion to identify yo	our case:									
Deb	tor 1	Larry Allen C	Cluchey				_		f this is:			
<u>.</u>									amended filing			
	otor 2									ving postpetition cha the following date:	apter	
(Spo	ouse, if filing)							13	expenses as or	the following date:		
United States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN								MM / DD / YYYY				
Cas	e number											
(If kı	nown)											
Of	fficial Fo	orm 106J										
S	chedule	J: Your I	Exner	1999							12/15	
				. If two married peop	ple are f	filing together, bo	oth are ed	uall	v responsible fo	or supplying correc		
info	ormation. If m		eded, atta	ch another sheet to								
Par	t 1: Descr	ribe Your House	hold									
1.	Is this a joir		iioiu									
	■ No. Go to											
		es Debtor 2 live i	n a sonar	ate household?								
	□ 103. <b>D00</b>		ii a sepai	ate flousefloid:								
	= ::	-	t file Offic	al Form 106J-2, Expe	ansas fr	or Senarate House	hold of D	ahtor	2			
		es. Debiol 2 mus	ot file Office	aπ σπη 1005-2, <i>Ελρ</i> ί	erises ic	n Separate House	TIOIG OF DE	CDIOI	۷.			
2.	Do you have	e dependents?	☐ No									
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information each dependent		Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	ı	
	Do not state	the						_		□ No	l	
	dependents					Wife			74	■ Yes		
										□ No		
										☐ Yes		
										☐ No		
										☐ Yes		
										☐ No		
•	_									☐ Yes		
3.	expenses of	oenses include f people other tl d your depende	han 👝	No Yes								
Dor	t 2: Estim	oto Vour Ongois	na Manth	v Evnances								
		ate Your Ongoing the Congress of the Congress		uptcy filing date unl	less vou	are using this fo	orm as a	supp	lement in a Cha	pter 13 case to rea	oort	
exp				y is filed. If this is a								
Incl	lude expense	s paid for with r	non-cash	government assista	ance if v	ou know						
the	value of sucl	h assistance and		luded it on Schedu					V			
(Off	ficial Form 10	)6l.)						_	Your expe	enses		
4.				ses for your resider	nce. Inc	lude first mortgage		\$		0.00		
	. ,	nd any rent for the	= ground c	ıı iot.			-т.	Ψ _				
	ir not includ	led in line 4:										
	4a. Real e	estate taxes					4a.	\$		336.00		
	•	rty, homeowner's					4b.	- : -		25.00		
				ıpkeep expenses			4c.	- : -		45.00		
_		owner's associat			00 h = ==	o oguitu la	4d.			230.00		
5.	Additional r	nortgage payme	ents for yo	our residence, such	as nome	e equity loans	5.	\$_		0.00		

ilities:  Electricity, heat, natural gas  Water, sewer, garbage collection  Telephone, cell phone, Internet, satellite, and cable services  Other. Specify:  od and housekeeping supplies ilidcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. In not include car payments. Itertainment, clubs, recreation, newspapers, magazines, and books inaritable contributions and religious donations surance. In the insurance deducted from your pay or included in lines 4 or 20.  a. Life insurance b. Health insurance c. Vehicle insurance. Specify:	6b. 6c. 6d. 7. 8. 9.		200.00 0.00 304.00 0.00 735.00 0.00 155.00 120.00 148.00 200.00 100.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies dildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. Include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books faritable contributions and religious donations surance. In not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance. Specify:	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.		0.00 304.00 0.00 735.00 0.00 155.00 120.00 148.00 200.00
Telephone, cell phone, Internet, satellite, and cable services  Other. Specify:  od and housekeeping supplies sildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. onot include car payments. stertainment, clubs, recreation, newspapers, magazines, and books saritable contributions and religious donations surance. onot include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify:	6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.		304.00 0.00 735.00 0.00 155.00 120.00 148.00 200.00
od and housekeeping supplies sildcare and children's education costs bothing, laundry, and dry cleaning rsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. In not include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books arritable contributions and religious donations surance. In not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify:	6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 735.00 0.00 155.00 120.00 148.00 200.00
od and housekeeping supplies sildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. onot include car payments. stertainment, clubs, recreation, newspapers, magazines, and books faritable contributions and religious donations surance. onot include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify:	7. 8. 9. 10. 11. 12. 13. 14.	\$	735.00 0.00 155.00 120.00 148.00 200.00
dildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. onot include car payments. tertainment, clubs, recreation, newspapers, magazines, and books taritable contributions and religious donations surance. onot include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify:	8. 9. 10. 11. 12. 13. 14.	\$	0.00 155.00 120.00 148.00 200.00
othing, laundry, and dry cleaning rsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. onot include car payments. stertainment, clubs, recreation, newspapers, magazines, and books taritable contributions and religious donations surance. onot include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify:	9. 10. 11. 12. 13. 14.	\$	0.00 155.00 120.00 148.00 200.00
rsonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. In not include car payments. Itertainment, clubs, recreation, newspapers, magazines, and books arritable contributions and religious donations surance. In not include insurance deducted from your pay or included in lines 4 or 20. In a. Life insurance Iteration. Iteration. Include insurance deducted from your pay or included in lines 4 or 20. In the insurance Iteration. Include insurance	10. 11. 12. 13. 14.	\$	120.00 148.00 200.00 100.00
edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. In not include car payments. Itertainment, clubs, recreation, newspapers, magazines, and books arritable contributions and religious donations surance. In not include insurance deducted from your pay or included in lines 4 or 20. In a. Life insurance Iteration. Include insurance Iteration. Include insurance deducted from your pay or included in lines 4 or 20. In the insurance Iteration. Include car payments. Include	11. 12. 13. 14.	\$ \$ \$	148.00 200.00 100.00
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not include car payments.  Itertainment, clubs, recreation, newspapers, magazines, and books Itertainment, clubs, recreations Iterta	13. 14. 15a.	\$	200.00 100.00
tertainment, clubs, recreation, newspapers, magazines, and books taritable contributions and religious donations surance. In not include insurance deducted from your pay or included in lines 4 or 20. In a. Life insurance In the line insurance insurance In the line insurance insurance insurance.	13. 14. 15a.	\$	100.00
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surance. In not include insurance deducted from your pay or included in lines 4 or 20. In a. Life insurance Itherefore the insurance Itherefore the insurance Itherefore the insurance Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines 4 or 20. Itherefore the insurance deducted from your pay or included in lines	15a.	·	0.00
o not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify:		ф.	
<ul><li>a. Life insurance</li><li>b. Health insurance</li><li>c. Vehicle insurance</li><li>d. Other insurance. Specify:</li></ul>		<b>c</b>	
<ul><li>b. Health insurance</li><li>c. Vehicle insurance</li><li>d. Other insurance. Specify:</li></ul>			
c. Vehicle insurance d. Other insurance. Specify:	15b.	·	76.67
d. Other insurance. Specify:		·	314.67
	15c.	·	88.00
	15d.	. \$	0.00
xes. Do not include taxes deducted from your pay or included in lines 4 or 20.	16	<b>c</b>	0.00
ecify:	16.	. \$	0.00
stallment or lease payments: a. Car payments for Vehicle 1	17a.	¢	413.22
b. Car payments for Vehicle 2	17a. 17b.	·	
c. Other. Specify:	17b. 17c.	·	0.00
d. Other. Specify:	17d. 17d.	·	0.00
our payments of alimony, maintenance, and support that you did not report as		. Ф	0.00
ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	. \$	0.00
her payments you make to support others who do not live with you.		\$	0.00
ecify:	19.	·	
her real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Y	our Income.	
a. Mortgages on other property	20a.		0.00
b. Real estate taxes	20b.	\$	0.00
c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
d. Maintenance, repair, and upkeep expenses	20d.	. \$	0.00
e. Homeowner's association or condominium dues	20e.	\$	0.00
her: Specify: Pet - care/food/vet	21.	+\$	40.00
		+\$	100.00
		· -	165.00
		+\$	22.00
9			3,817.56
b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2			
c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,817.56
Iculate your monthly net income	23a	\$	4,207.60
Ilculate your monthly net income. a. Conviline 12 (your combined monthly income) from Schedule I		·	3,817.56
a. Copy line 12 (your combined monthly income) from Schedule I.	230.	Ψ	3,017.30
· · · · · · · · · · · · · · · · · · ·			
<ul><li>a. Copy line 12 (your combined monthly income) from Schedule I.</li><li>b. Copy your monthly expenses from line 22c above.</li></ul>			390.04
	c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses e. Homeowner's association or condominium dues her: Specify: Pet - care/food/vet blidays/Birthdays (family, 5 grandchildren) scellaneous Household PA lculate your monthly expenses a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses. lculate your monthly net income. a. Copy line 12 (your combined monthly income) from Schedule I.	c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses e. Homeowner's association or condominium dues her: Specify: Pet - care/food/vet plidays/Birthdays (family, 5 grandchildren) scellaneous Household PA lculate your monthly expenses a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses. lculate your monthly net income. a. Copy line 12 (your combined monthly income) from Schedule I. b. Copy your monthly expenses from line 22c above.  20c.	c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses e. Homeowner's association or condominium dues her: Specify: Pet - care/food/vet plidays/Birthdays (family, 5 grandchildren) scellaneous Household hard clulate your monthly expenses a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses.  sliculate your monthly net income. a. Copy line 12 (your combined monthly income) from Schedule I.  20c. \$ 20d. \$ 20d. \$ 21d. +\$ 21d. +\$ 21d. +\$ 22d. \$ 23d.

No.

☐ Yes.

Explain here: #20 Co-owner resides in and covers all expenses for 7031 Mindew (taxes/insurance/mntnce/condo fees, etc.). Sister currently residing with Debtor as she recouperates from an injury.

Fill in this info	ormation to identify your	case:			
Debtor 1	Larry Allen Cluch	еу			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Opouse II, IIIIIg)	i iist Name	Wilder Name	Lastivame		
United States	Bankruptcy Court for the:	WESTERN DISTRICT C	OF MICHIGAN		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	rm 106Dec				
Declara	ation About a	n Individual	Debtor's Sc	hedules	12/15
	. 18 U.S.C. §§ 152, 1341, 1 ign Below	519, and 3571.			
ا Did you	pay or agree to pay some	one who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes	. Name of person				nptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules file	d with this declaration	and
·					
	arry Allen Cluchey		XSignature of	Dobtor 2	
	/ Allen Cluchey ture of Debtor 1		Signature of	Deniol 2	
-			Data		
Date	March 1, 2021		Date		

Fill	in this inforn	nation to identify your	case:			
Deb	otor 1	Larry Allen Cluc	Middle Name	Last Name		
Deb	otor 2	riistivanio	Middle Name	Edit Name		
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF	MICHIGAN		
Cas	se number					
(if kn	nown)				_	heck if this is an mended filing
						, and the second
Of	ficial Fo	rm 107				
			Affairs for Individ	duals Filing for B	ankruptcy	4/19
					equally responsible for sup	plvina correct
info	rmation. If m	ore space is needed,	attach a separate sheet to		additional pages, write you	
num	iber (if Knowi	n). Answer every ques	stion.			
Par	t 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	Married					
	□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you li	ved in the last 3 years. Do no	ot include where you live now	'.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
			lived there			lived there
3.					ity property state or territory co, Texas, Washington and W	
Siait	es and territori	es include Anzona, Ca	illottila, Idatio, Louisiatia, Ne	vada, New Mexico, Fuello Ni	co, rexas, washington and w	isconsin.)
	■ No			W: E		
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4	Did you hav	e any income from en	anloyment or from operatin	a a husiness during this ve	ear or the two previous caler	ndar vears?
7.	Fill in the tota	al amount of income you	u received from all jobs and a	all businesses, including part-	time activities.	idai years:
	ii you are iiii	ig a joint case and you	nave income that you receive	e together, list it only once un	del Deblor 1.	
	□ No					
	■ Yes. Fil	l in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
			οπουκ απ τη ατ αρριγ.	exclusions)	oneon all that apply.	and exclusions)
		year before that:	■ Wages, commissions,	\$11,931.00	☐ Wages, commissions,	
(Ja	nuary 1 to De	ecember 31, 2019 )	bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known)

5.	Inclu and	ide ind other	come rega public ben	rdless of wheth efit payments;	e during this year or the the the that income is taxable. It pensions; rental income; insee and you have income the	Examples iterest; div	of other income are a idends; money collect	alimony; child supp cted from lawsuits;	royalties; an			
	List e	t each source and the gross income from each source separately. Do not include income that you listed in line 4.										
		No										
		Yes.	Fill in the o	details.								
					Debtor 1			Debtor 2				
					Sources of income Describe below.	eacl (bef	ss income from h source ore deductions and usions)	Sources of inc Describe below		Gross income (before deductions and exclusions)		
				ent year until ankruptcy:	Unemployment		\$3,564.05					
					Social Security Benefits		\$4,695.60					
			Social Security Benefits		\$30,535.20							
					Unemployment compensation		\$23,745.00					
					Income Tax Refunds joint IRS	-	\$1,441.00					
					Income Tax Refunds joint State of MI	-	\$1,871.00					
				efore that: r 31, 2019 )	Social Security Benefits		\$21,340.00					
Pa	rt 3:	List	Certain P	ayments You	Made Before You Filed for	or Bankru	ıptcy					
6.	Are	either	Debtor 1	's or Debtor 2	's debts primarily consur	ner debts	?					
		No.			Debtor 2 has primarily cor			s are defined in 11	U.S.C. § 10	1(8) as "incurred by an		
					personal, family, or house							
			During th  No.	e 90 days befo Go to line 7	ore you filed for bankruptcy	, did you p	ay any creditor a tota	ıl of \$6,825* or mo	re?			
			□ Yes		· each creditor to whom you	paid a tota	al of \$6,825* or more	in one or more pay	ments and t	the total amount you		
			* Subjec	not include	editor. Do not include payn payments to an attorney for t on 4/01/22 and every 3 year	r this ban	kruptcy case.	•		•		
		Yes.	Debtor 1	or Debtor 2 o	r both have primarily cor	sumer de	ebts.					
			□ <sub>No.</sub>	Go to line 7	·.							
			☐ Yes	List below e	each creditor to whom you ments for domestic suppor this bankruptcy case.							
Creditor's Name and Address					Dates of pay	ment	Total amount paid	Amount you still owe	Was this	payment for		

Debtor 1 Larry Allen Cluchey

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Case number (if known)

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner r more of their voting	erships of which yes g securities; and a	ou are a genera any managing a	I partner; corporation gent, including one fo
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		nents or transfer a	iny property on a	account of a de	bt that benefited ar
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment tor's name
Pai	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No					
	Yes. Fill in the details.  Case title	Nature of the case	Court or agency		Status of the case	
	Case number	Nature of the case	ocult of agency		Status of the case	
	Worthington Energy Innovations, LLC v. American Research Products, Inc. and Larry Cluchey 3:20-cv-01454-JZ	Breach of Contract/Fraud/Co nversion	Clerk of the Court U.S. District Court - ND of OH 1716 Spielbusch Avenue Toledo, OH 43604		■ Pending □ On appeal □ Concluded  Complaint filed 7/1/2020, Discovery pending	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  ■ No. Go to line 11.  □ Yes. Fill in the information below.		rty repossessed, f	oreclosed, garni	shed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  No Yes. Fill in the details.		uding a bank or fir	nancial institutio	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an ■ No □ Yes		rty in the possess			fit of creditors, a

Debtor 1 Larry Allen Cluchey

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De	btor 1 Larry Allen Cluchey	Case number	(if known)	
Pa	tt 5: List Certain Gifts and Contributions			
13.	■ No	, did you give any gifts with a total value of more t	han \$600 per person	?
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:		<b>.</b>	
14.	Within 2 years before you filed for bankruptcy  ■ No  □ Yes. Fill in the details for each gift or contribute.	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	
	how the loss occurred Include	tribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepare	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>			
	Person Who Was Paid Address Email or website address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not You Wardrop & Wardrop, P.C. 300 Ottawa Avenue, N.W. Suite 150 Grand Rapids, MI 49503-2308 bkfilings@wardroplaw.com	Attorney Fees & Costs	February 25, 2021	\$4,375.00
	Wardrop & Wardrop, P.C. 300 Ottawa Avenue, N.W. Suite 150 Grand Rapids, MI 49503-2308 bkfilings@wardroplaw.com	LITIGATION RETAINER EARNED UPON RECEIPT	02/25/2021	\$14,000.00
	Abacus Credit Counseling	Pre-Petition Credit Counseling	2/20/2021	\$25.00
	www.AbacusCC.org			
	-			

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Del	otor 1 Larry Allen Cluchey		Case number	(if known)	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	CC Advising, Inc 703 Washington Ave. Suite 200 Bay City, MI 48708-5732	pre-petition credit couseling o	course	July 2020	Unknown
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you lie  No	or to make payments to your creditor		or transfer any prope	rty to anyone who
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already in No	iness or financial affairs? e as security (such as the granting of a s			
	Yes. Fill in the details.				
	Person Who Received Transfer Address			any property or received or debts change	Date transfer was made
	Person's relationship to you			3.	
	Quattro Auto Group LLC 1316 Goldsmith Plymouth, MI 48170	• • • • • • • • • • • • • • • • • • • •		less Members 08/18/2020 dit Union lien, 367	
	None				
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-protection No  Yes. Fill in the details.		self-settled tro	ust or similar device (	of which you are a
	Name of trust	Description and value of the prop	erty transferr	ed	Date Transfer was
					made

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Del	ebtor 1 Larry Allen Cluchey			Case num	nber (if known)						
Par	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and S	torage Unit	s						
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No  Yes. Fill in the details.	r other financial accou	nts; certificate:	s of deposi		, ,					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
	Lake Michigan Credit Union P.O Box 2848 Grand Rapids, MI 49501	XXXX-4447	Checking  ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other		named on account when opened for sister who relocated to MI, no funds contributed, removed 2020	Unknown					
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	r bankruptcy, a	ny safe de <sub>l</sub>	posit box or other depos	itory for securities,					
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?										
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?					
Par	rt 9: Identify Property You Hold or Control t	for Someone Else									
23.	Do you hold or control any property that son for someone.	neone else owns? Incl	ude any propei	rty you bor	rowed from, are storing	for, or hold in trust					
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value					
Par	rt 10: Give Details About Environmental Info	rmation									
For	the purpose of Part 10, the following definition	ons apply:									
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surfac substances, wastes, o	e water, ground or material.	dwater, or	other medium, including	statutes or					
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	sal sites.									
	Hazardous material means anything an environment, hazardous material, pollutant, contaminant,		as a hazardous	s waste, ha	zardous substance, toxi	c substance,					

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Larry Allen Cluc	hev
---------------------------	-----

Case number (if known)

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental la											
		No Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, Sta ZIP Code)	ate and	Environment know it	tal law, if you	Date of notice				
25.	Hav	e you notified any governmental unit of	any release of hazardous materia	I?							
		■ No □ Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, Sta ZIP Code)	ate and	Environment know it	tal law, if you	Date of notice				
26.	Hav	e you been a party in any judicial or adr	ministrative proceeding under any	environ	nmental law? I	nclude settlements	and orders.				
		No Yes. Fill in the details.									
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the ca	se	Status of the case				
Par	t 11:	Give Details About Your Business or	Connections to Any Business								
27.	With	nin 4 years before you filed for bankrupt	tcy, did you own a business or hav	ve any o	of the following	g connections to an	y business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time										
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)										
	☐ A partner in a partnership										
	■ An officer, director, or managing executive of a corporation										
	■ An owner of at least 5% of the voting or equity securities of a corporation										
		No. None of the above applies. Go to F	Part 12.								
		Yes. Check all that apply above and fill	I in the details below for each busi	iness.							
	Ad	siness Name dress	Describe the nature of the business  Name of accountant or bookkeeper		Employer Identification number Do not include Social Security number or ITIN.						
	(Nui	mber, Street, City, State and ZIP Code)			Dates business existed						
		nerican Research Products, Inc. pa 571 Gordon Industrial Court	design/manufacturing, 50% Shareholder			20-2483726					
		ite E ron Center, MI 49315	The CPA Group P.C. 4267 Canal Ave., SW Grandville MI 49418			02/16/2005 - prese (ceased operation					
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	tcy, did you give a financial statem	nent to a	inyone about y	our business? Incl	ude all financial				
		No									
		Yes. Fill in the details below.									
		me dress mber, Street, City, State and ZIP Code)	Date Issued								

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Debtor 1 Larry Allen Cluchey	Case number (if known)
Part 12: Sign Below	
are true and correct. I understand the	ent of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers naking a false statement, concealing property, or obtaining money or property by fraud in connection es up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Larry Allen Cluchey	
Larry Allen Cluchey Signature of Debtor 1	Signature of Debtor 2
Date March 1, 2021	Date
■ No	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☐ Yes	
■ No	ho is not an attorney to help you fill out bankruptcy forms?
☐ Yes. Name of Person Attack	e Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your o	ase:				
Debtor 1	Larry Allen Cluche					
Debtor 2	First Name	Middle Name		Last Name		
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DIST	RICT OF MI	CHIGAN		
Case number (if known)						☐ Check if this is an amended filing
	nt of Intention			s Filing Under Ch	apter '	7 12/15
	ividual filing under chap e claims secured by you	-	II out this to	orm if:		
■ you have leas You must file thi	sed personal property and is form with the court wiever is earlier, unless the	nd the lease has nothin 30 days after	you file yo	ur bankruptcy petition or by the cause. You must also send copic		
	eople are filing together nd date the form.	in a joint case, bo	oth are equa	ally responsible for supplying co	orrect inforn	nation. Both debtors must
	and accurate as possibl our name and case num		s needed, a	ttach a separate sheet to this fo	rm. On the t	op of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims				
		rt 1 of Schedule D	D: Creditors	Who Have Claims Secured by F	Property (Of	ficial Form 106D), fill in the
information be Identify the cr	elow. editor and the property th	at is collateral	What do secures	you intend to do with the prope a debt?	erty that	Did you claim the property as exempt on Schedule C?
Creditor's <b>E</b> name:	Bank of America			nder the property. in the property and redeem it.		□ No
Description of			Retail	n the property and enter into a firmation Agreement.		■ Yes
property securing debt:	VIN ending in 3058 jointly with non fili			n the property and [explain]:		
Part 2: List V	our Unexpired Personal	Proporty Lossos				
For any unexpire in the information	ed personal property lea on below. Do not list real	se that you listed estate leases. Ur	nexpired lea	le G: Executory Contracts and U ases are leases that are still in et does not assume it. 11 U.S.C. §	ffect; the lea	
Describe your u	inexpired personal prop	erty leases			Wi	Il the lease be assumed?
Loccorio nama:						
Lessor's name: Description of leader Property:	ased				_	No Yes
Lessor's name:						No
Description of lea	ased				_	Yes
Lessor's name:						No
Official Form 108		Statement of Ir	ntention for	Individuals Filing Under Chapte	er 7	page 1

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Debtor 1 Larry Allen Cluchey	Case number (if known)
Description of leased	
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	perty of my estate that secures a debt and any personal
X /s/ Larry Allen Cluchey X	
Larry Allen Cluchey Signature of Debtor 1	re of Debtor 2
Date March 1, 2021 Date	

Fill in this	s information to identify your case:	Ch	eck one box only as	s directed in this form and	in Form
Debtor 1	Larry Allen Cluchey	123	2A-1Supp:		
Debtor 2 (Spouse, if			1. There is no pr	esumption of abuse	
	tates Bankruptcy Court for the: Western District of	f Michigan	applies will be	n to determine if a presume made under <i>Chapter 7 N</i>	
Case nu	mber		Calculation (	Official Form 122A-2).	
(if known)				est does not apply now be ary service but it could ap	
			☐ Check if this is	s an amended filing	
Officia	al Form 122A - 1				
Chap	ter 7 Statement of Your Cur	rent Monthly Inc	ome		04/20
attach a s case num	plete and accurate as possible. If two married people a eparate sheet to this form. Include the line number to w ber (if known). If you believe that you are exempted froi military service, complete and file <i>Statement of Exemp</i> Calculate Your Current Monthly Income	rhich the additional information a m a presumption of abuse becau	ipplies. On the top o se you do not have p	f any additional pages, write orimarily consumer debts or	e your name and r because of
	at is your marital and filing status? Check one on	ıly.			
	Not married. Fill out Column A, lines 2-11.				
	Married and your spouse is filing with you. Fill oເ	ut both Columns A and B, lines	2-11.		
	Married and your spouse is NOT filing with you.	You and your spouse are:			
	☐ Living in the same household and are not lega	Illy separated. Fill out both Co	lumns A and B, line	s 2-11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are le- living apart for reasons that do not include evadir	egally separated under nonban	kruptcy law that ap	plies or that you and your	
101(10 the 6 n	the average monthly income that you received from all A). For example, if you are filing on September 15, the 6-months, add the income for all 6 months and divide the total as own the same rental property, put the income from that p	onth period would be March 1 through 6. Fill in the result. Do not include	ugh August 31. If the a	amount of your monthly income t more than once. For example	e varied during le, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ur gross wages, salary, tips, bonuses, overtime, roll deductions).	and commissions (before all	\$		
Col	<b>mony and maintenance payments.</b> Do not include umn B is filled in.		\$	\$	
of y from and	amounts from any source which are regularly parou or your dependents, including child support. In an unmarried partner, members of your household roommates. Include regular contributions from a spd in. Do not include payments you listed on line 3.	Include regular contributions I, your dependents, parents,	\$	\$	
	income from operating a business, profession,	or farm			
		Debtor 1			
1	ss receipts (before all deductions)	\$			
	linary and necessary operating expenses	-\$		•	
	monthly income from a business, profession, or farm	m \$ Copy here ->	\$	_ \$	
6. <b>Ne</b> t	income from rental and other real property	Debtor 1			
C	ss receipts (before all deductions)	\$			
	iss receipts (before all deductions)  linary and necessary operating expenses	-\$			
	monthly income from rental or other real property	S Copy here ->	\$	\$	
	prest dividends and royalties	*	\$	- \$	

Official Form 122A-1

Debtor	Larry Allen Cluchey	Case number (if known)	
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8.	Unemployment compensation	\$	\$
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you \$ For your spouse \$		
	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.		\$
	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below	\$	\$
		\$	\$
	Total amounts from separate pages, if any.	\$	\$
	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  \$	+ \$	Total current monthly
Part	2: Determine Whether the Means Test Applies to You		income
12.	Calculate your current monthly income for the year. Follow these steps:		
	12a. Copy your total current monthly income from line 11	Copy line 11 h	nere=> \$
	Multiply by 12 (the number of months in a year)		x 12
	12b. The result is your annual income for this part of the form		12b. \$
13.	Calculate the median family income that applies to you. Follow these steps:		
	Fill in the state in which you live.		
	Fill in the number of people in your household.		
	Fill in the median family income for your state and size of household	in the separate instruct	13. \[\$
14.	How do the lines compare?		
	14a.    Line 12b is less than or equal to line 13. On the top of page 1, check box Go to Part 3. Do NOT fill out or file Official Form 122A-2.	x 1, There is no presum	ption of abuse.
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The programmed</i> Go to Part 3 and fill out Form 122A–2.	resumption of abuse is o	determined by Form 122A-2.
Part	3: Sign Below		
	By signing here, I declare under penalty of perjury that the information on this st	atement and in any atta	achments is true and correct.
	X /s/ Larry Allen Cluchey		
	Larry Allen Cluchey		

Official Form 122A-1

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Debtor 1	Larry Allen Cluchey	Case number (if known)	
	Signature of Debtor 1		
Dat	March 1, 2021 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Fill	in this inf	orma	ntion to identify your case:		
Deb	tor 1	La	rry Allen Cluchey		
	tor 2 ouse, if filin	ng)			
Unit	ed States	Bank	ruptcy Court for the: Western District of Michigan		
	e number nown)			I	☐ Check if this is an amended filing
Sta	ateme	nt	n 122A - 1Supp of Exemption from Presumption of A		- , , , ,
exen	npted from usions in	n a p this s	nt together with Chapter 7 Statement of Your Current Monthly In resumption of abuse. Be as complete and accurate as possible statement applies to only one of you, the other person should conc. § 707(b)(2)(C).	. If tw	vo married people are filing together, and any of the
Part	1 Id	entify	the Kind of Debts You Have		
1.	personal	, fami	ts primarily consumer debts? Consumer debts are defined in 11 Uly, or household purpose." Make sure that your answer is consistenting for Bankruptcy (Official Form 1).		
			Form 122A-1; on the top of page 1 of that form, check box 1, <i>There</i> ement with the signed Form 122A-1.	∍ is no	p presumption of abuse, and sign Part 3. Then submit this
	☐ Yes.	Go to	Part 2.		
Part	124 D	eterm	ine Whether Military Service Provisions Apply to You		
2.	_ `		abled veteran (as defined in 38 U.S.C. § 3741(1))?		
	□ No.				
			ou incur debts mostly while you were on active duty or while you were S.C. § 101(d)(1); 32 U.S.C. § 901(1).	re pe	rforming a homeland defense activity?
	1	No.	Go to line 3.		
		es.	Go to Form 122A-1: on the top of page 1 of that form, check box 1, submit this supplement with the signed Form 122A-1.	Ther	re is no presumption of abuse, and sign Part 3. Then
3.	Are you	or ha	ve you been a Reservist or member of the National Guard?		
	□ No.	Con	pplete Form 122A-1. Do not submit this supplement.		
	☐ Yes.	Wer	e you called to active duty or did you perform a homeland defense a	activit	y? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
	<b>□</b> 1	No.	Complete Form 122A-1. Do not submit this supplement.		
		es.	Check any one of the following categories that applies:		
			I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.	t į	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then
			I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on, which is fewer than 540 days before I file this bankruptcy case.	t a	submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a
			I am performing a homeland defense activity for at least 90 day	ve l	homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
			I performed a homeland defense activity for at least 90 days, ending on, which is fewer than 540 days before file this bankruptcy case.	ااد	If your exclusion period ends before your case is closed, you may have to file an amended form later.

Official Form 122A-1Supp

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:21-00524-jwb Doc #:1 Filed: 03/02/2021 Page 55 of 59

### **United States Bankruptcy Court** Western District of Michigan

western District of Michigan						
In re	Larry Allen Cluchey		Case No.			
		Debtor(s)	Chapter	7		
	7/ED	TELCATION OF OPEDITOR				
	VERIFICATION OF CREDITOR MATRIX					
he ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.		
Date:	March 1, 2021	/s/ Larry Allen Cluchey				
		Larry Allen Cluchey				

Signature of Debtor

AMERICAN RESEARCH PRODUCTS INC C/O LARRY CLUCHEY SHAREHOLDER 7095 MINDEW DRIVE SW BYRON CENTER MI 49315

AMEX
CORRESPONDENCE/BANKRUPTCY
PO BOX 981540
EL PASO TX 79998

AMEX P.O. BOX 981537 EL PASO TX 79998-1535

BANK OF AMERICA ATTN: BANKRUPTCY NC4-105-03-14 PO BOX 26012 GREENSBORO NC 27420

BANK OF AMERICA PO BOX 45144 JACKSONVILLE FL 32231

BANK OF AMERICA P O BOX 2759 JACKSONVILLE FL 32202

BANK OF AMERICA FL9-600-02-26 P O BOX 45224 JACKSONVILLE FL 32232-5224

CHASE CARD SERVICES ATTN: BANKRUPTCY PO BOX 15298 WILMINGTON DE 19850

CHASE CARD SERVICES PO BOX 15369 WILMINGTON DE 19850

CITI COSTCO ANYWHERE VISA CARD PO BOX 6190 SIOUX FALLS SD 57117 CLERK OF THE COURT U.S. DISTRICT COURT - ND OF OH 1716 SPIELBUSCH AVENUE TOLEDO OH 43604

COMERICA BANK
P.O. BOX 71203
PHILADELPHIA PA 19176

COMERICA BANK COMERICA BANK TOWER 1717 MAIN STREET DALLAS TX 75201

CONNIE HOFFMANN 7031 MINDEW DR SW BYRON CENTER MI 49315

COSTCO ANYWHERE VISA CARD ATTN: BANKRUPTCY PO BOX 6500 SIOUX FALLS SD 57117

DELL FINANCIAL SERVICES ATTN: BANKRUPTCY PO BOX 81577 AUSTIN TX 78708

DELL FINANCIAL SERVICES PO BOX 81607 AUSTIN TX 78708

INTERNAL REVENUE SERVICE INSOLVENCY UNIT PO BOX 7346 PHILADELPHIA PA 19101-7346

INTERNAL REVENUE SERVICE 3251 N. EVERGREEN DRIVE, NE INSOLVENCY GROUP 4, STOP 93 GRAND RAPIDS MI 49525

JAMES P. SILK SPENGLER NATHANSON P.L.L. 900 ADAMS STREET TOLEDO OH 43604-5505 MICHIGAN DEPT OF TREASURY BANKRUPTCY - CLAIMS UNIT PO BOX 30168 LANSING MI 48909

MSU FEDL CREDIT UNION ATTN: BANKRUPTCY PO BOX 1208 EAST LANSING MI 48826

MSU FEDL CREDIT UNION 3777 WEST ROAD EAST LANSING MI 48826

OFFICE OF THE U.S. TRUSTEE THE LEDYARD BLDG 2ND FLOOR 125 OTTAWA AVE., NW, STE 200R GRAND RAPIDS MI 49503

SHERRY CLUCHEY 7095 MINDEW DRIVE SE BYRON CENTER MI 49315

STEVEN D. FORRY ICE MILLER LLP 250 WEST STREET SUITE 700 COLUMBUS OH 43215

SYNCHRONY BANK/ JC PENNEYS ATTN: BANKRUPTCY PO BOX 965064 ORLANDO FL 32896

SYNCHRONY BANK/ JC PENNEYS PO BOX 965007 ORLANDO FL 32896

SYNCHRONY BANK/CARE CREDIT ATTN: BANKRUPTCY DEPT PO BOX 965064 ORLANDO FL 32896

SYNCHRONY BANK/CARE CREDIT C/O PO BOX 965036 ORLANDO FL 32896 Case:21-00524-jwb Doc #:1 Filed: 03/02/2021 Page 59 of 59

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WESTERN DISTRICT OF MICHIGAN
BANKRUPTCY SECTION
PO BOX 208
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